

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF United States of America		COURT CASE NUMBER 17-00209
DEFENDANT Yvonne D. Weston		TYPE OF PROCESS Sale
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN		
SERVE AT	Yvonne D. Weston	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 34 Horizon Drive, Fredericksburg, PA. 17026-9628	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		Number of process to be served with this Form 285
<div style="border: 1px solid black; padding: 5px; margin: 5px;"> KML Law Group, P.C. 701 Market Suite 5000 Philadelphia, PA 19106 </div>		Number of parties to be served in this case
		Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Minimum Bid: \$109,000.00

Sale: November 2, 2017 at 11:00 a.m.

Lebanon Co. Courthouse, 400 South Eighth St, Lebanon PA. 17042

Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 215-627-1322	DATE 10/31/17
---	---	----------------------------------	------------------

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 67	District to Serve No. 67	Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i> DAFC	Date 10/31/2017
---	--------------------	------------------------------	-----------------------------	---	--------------------

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode	
Address (complete only different than shown above)	Date 11/2/17	Time 11:00 <input checked="" type="checkbox"/> am <input type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy <i>[Signature]</i>	

Service Fee US.00	Total Mileage Charges including endeavors 40.00	Forwarding Fee /	Total Charges 176.00	Advance Deposits	Amount owed to U.S. Marshal or (Amount of Refund*) \$0.00
----------------------	--	---------------------	-------------------------	------------------	--

REMARKS:

Sold for \$112,000 (1) Deputy 10:00-12:00

- DISTRIBUTE TO:**
1. CLERK OF THE COURT
 2. USMS RECORD
 3. NOTICE OF SERVICE
 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 5. ACKNOWLEDGMENT OF RECEIPT

FILED
HARRISBURG, PA

NOV - 3 2017

Form USM-285
Rev. 11/13